

INVENTOR INFORMATION

Inventor One Given Name:: Rafael
Family Name:: Andino
Postal Address Line One:: 1961 Travers Circle
City:: Lawrenceville
State or Province:: Georgia
Country:: United States of America
Postal or Zip Code:: 30044
City of Residence:: Lawrenceville
State or Province of Residence:: Georgia
Country of Residence:: United States of America
Citizenship Country:: United States of America
Inventor Two Given Name:: Christopher
Family Name:: Brooks
Postal Address Line One:: 13 Meadow Lane
City:: Glen Head
State or Province:: New York
Country:: United States of America
Postal or Zip Code:: 11545
City of Residence:: Glen Head
State or Province of Residence:: New York
Country of Residence:: United States of America
Citizenship Country:: United States of America
Inventor Three Given Name:: Donald
Family Name:: Van Royen
Postal Address Line One:: 284 West End Avenue, Apartment 4B
City:: New York
State or Province:: New York
Country:: United States of America
Postal or Zip Code:: 10023
City of Residence:: New York
State or Province of Residence:: New York
Country of Residence:: United States of America
Citizenship Country:: United States of America

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 1473
Fax One:: 212-596-9090
Electronic Mail One:: jleiz@fishneave.com

APPLICATION INFORMATION

Title Line One:: APPARATUS AND METHODS FOR FACILITATING W
Title Line Two:: OUND HEALING
Total Drawing Sheets:: 3
Formal Drawings?:: Yes
Application Type:: Utility

Docket Number:: BIO-1 DIV.
Secrecy Order in Parent Appl.?:: No

REPRESENTATIVE INFORMATION

Representative Customer Number:: 1473
Registration Number One:: 26183
Registration Number Two:: 31069
Registration Number Three:: 46109

CONTINUITY INFORMATION

This application is a:: DIVISION OF
> Application One:: 09/872956
Filing Date:: 06-01-2001

Source:: PrintEFS Version 1.0.1